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ACOG
THE AMERICAN CONGRESS
OF OBSTETRICIANS
AND GYNECOLOGISTS

The Michigan Section of ACOG is opposed to House Bills 5711-13.

This legislation is poised to initiate a crisis in maternity care by driving Ob-Gyns out of Michigan. Requiring Michigan doctors to purchase inordinately high limit liability insurance policies will lead many to cease providing obstetric services. The end result is that Michigan women will not have access to the comprehensive women's health services provided by Ob-Gyns.

"Pregnancy complications" is the sixth leading cause of death in American women aged 20 to 24 and the seventh leading cause of death in others between the ages of 15 and 34. Michigan women need access to obstetrician-gynecologists (Ob-Gyns) to help reduce their risk of serious health complications related to pregnancy.

In 2004, Michigan's maternal mortality ratio ranked the 42nd worst in the country and was rated "unsatisfactory." A 2010 report by the Michigan Department of Community Health identified that 21 of the 83 counties in Michigan lacked even one Ob-Gyn provider. Ob-Gyn recruitment and retention will need to be a priority if Michigan is to make significant improvements in its excessive maternal mortality rate.

HB 5711 creates Section 17019, which imposes the burdensome requirement for one million dollars of professional liability coverage if an Ob-Gyn performs more than one abortion per week and has been the subject of two civil lawsuits. This is an onerous obligation that is not required for other procedures within Ob-Gyn or any other specialty. The risk of complications is no greater than for many other office-based procedures so the intent of this requirement creates a discriminatory economic obligation for Ob-Gyns. It would also invite lawsuits by those whose agenda is to restrict access to comprehensive healthcare services for women.

Legislation that interferes with the doctor-patient relationship will reduce the likelihood that women will seek important medical guidance during pregnancy and increases their likelihood of suffering from serious preventable pregnancy complications.

Conversations between physicians and patients are held in strict confidence because of the sensitive nature of many topics and because of the importance of full disclosure to facilitate accurate diagnosis and consideration of appropriate interventions. This is similar to the privileged discussions held between attorneys and clients and between clergy and parishioners. Without the tacit understanding that outside interference is proscribed, the

Michigan Section of ACOG testimony in opposition of House Bills 5711, 5712, and 5713

frank communication essential to these professional relationships would be inhibited and would hamper the effectiveness of any interaction.

Requiring physicians to perform a scripted screening interview, dictated by the State, during a professional discussion of great sensitivity and also requiring those responses to be documented in a prescribed format in the medical record encroaches upon the doctor-patient relationship in a manner that impacts not only that encounter, but future interactions as well. The knowledge that an honest response to the doctor could result in a child protective service evaluation or a report leading to a criminal charge carrying a five thousand dollar penalty is more than enough to discourage patients from discussing their situation candidly and lead them to treat other parts of the medical interview with similar contempt.

For the Ob-Gyns that are willing to tolerate the legal risks of providing obstetric care in Michigan, the preservation of the autonomous doctor-patient relationship is essential to maximize the impact on maternal mortality reduction. To do otherwise would further restrict the effectiveness of a team that is currently understaffed to meet the health needs of the women in Michigan.

The legislation before the Judiciary Committee, if enacted, will reduce access to Ob-Gyn specialists and negatively impact the health and welfare of Michigan women and therefore should be rejected.

The provisions in this package of bills serve the purposes of a special interest group at the expense of the female constituents of the State of Michigan and their families.

On behalf of the State's dedicated healthcare providers for women, the Michigan Section of ACOG urges legislators to vote NO.

Respectfully submitted,

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